

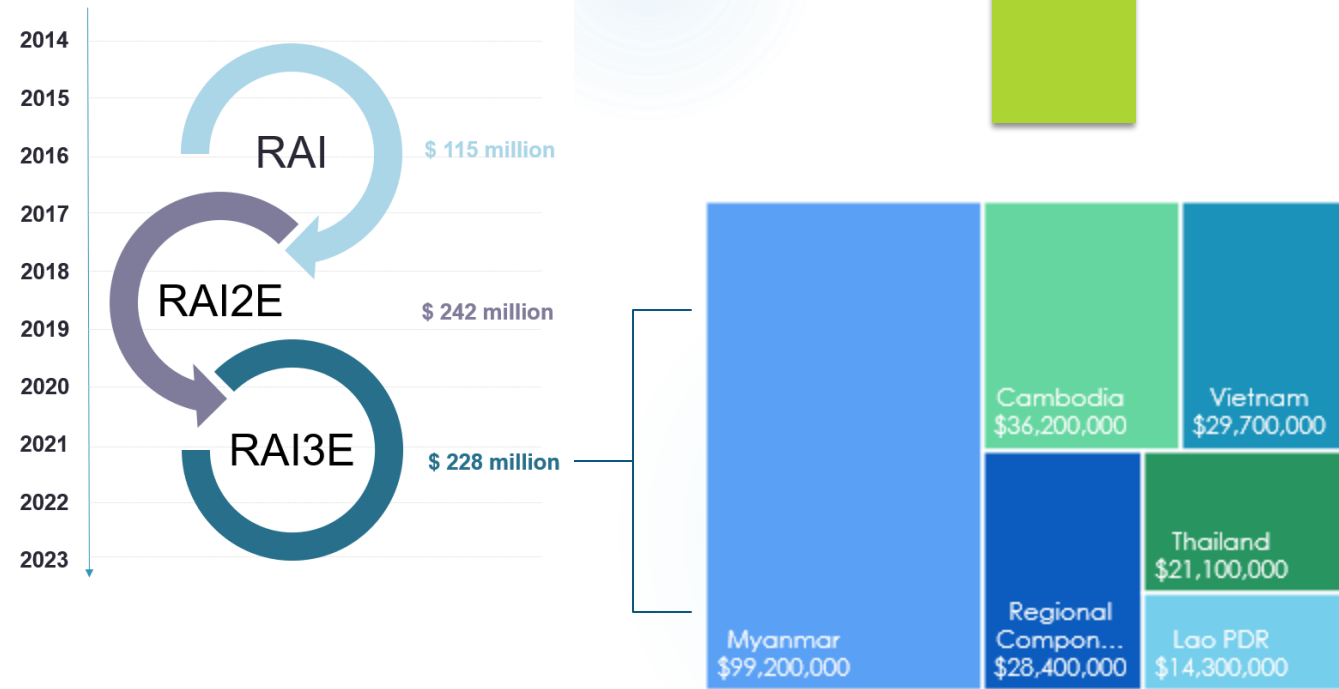
RAI regional
steering
committee

Debrief to Greater Mekong Sub-region Country Coordinating Mechanisms

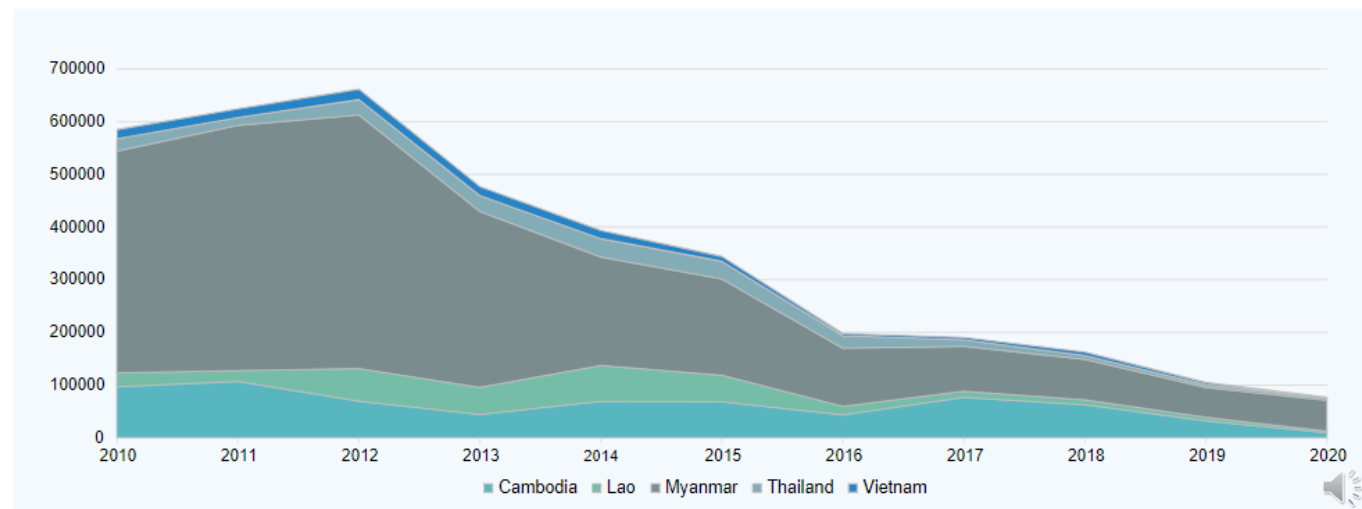


The Regional Artemisinin-Resistance Initiative (RAI3E)

- ▶ Launched in 2014 in response to the emergence of artemisinin-resistant malaria in the GMS.
- ▶ Funded by The Global Fund.
- ▶ Supports purchase of key malaria commodities, including vector control, diagnostics and quality-assured drugs
- ▶ Enables development of surveillance systems and case management by community health workers.
- ▶ Builds resilient and sustainable health and community systems.

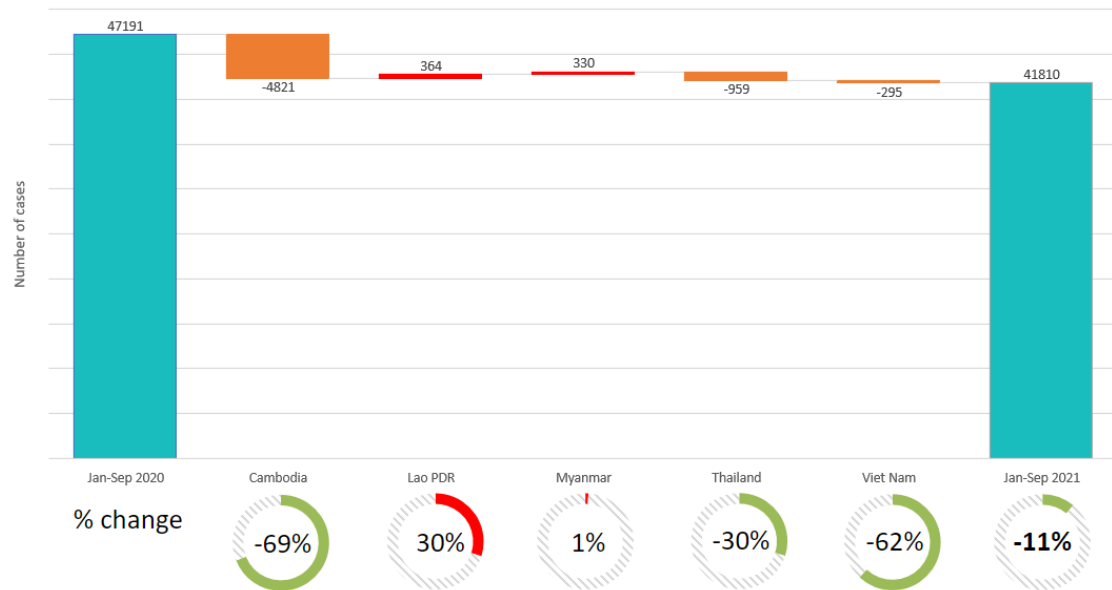


Malaria incidence in the GMS, 2010-2020

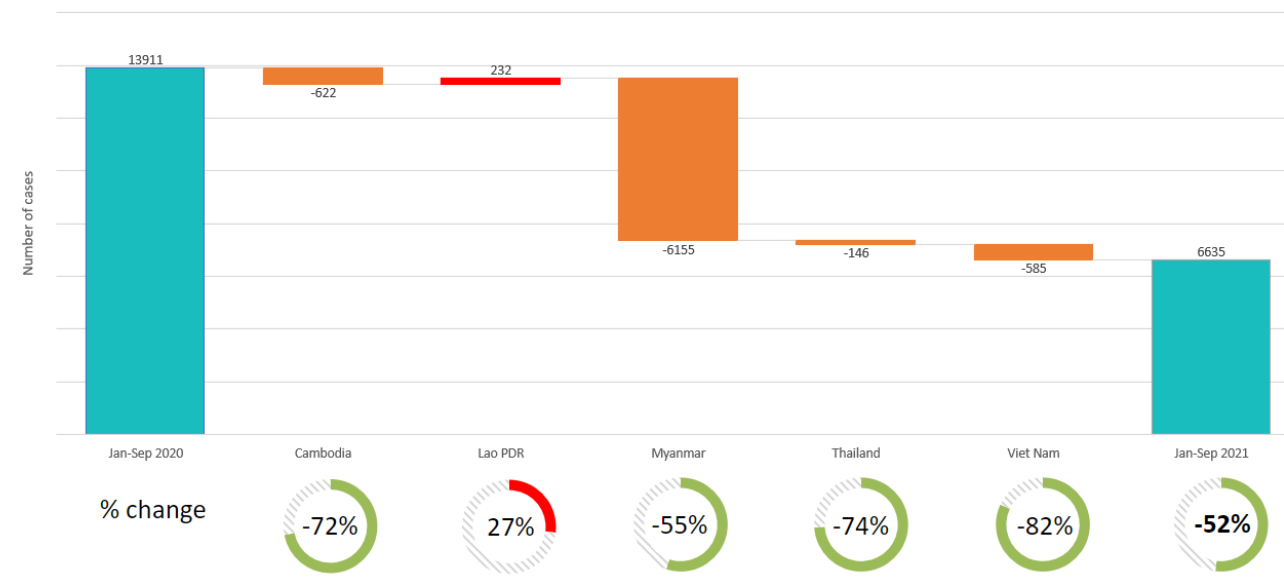


18th RAI Regional Steering Committee Meeting – Malaria Epidemiological Update

Changes in *P vivax* Cases from Jan-Sep 2020 to Jan-Sep 2021









Changes in *P falciparum* + *Mix* Cases from Jan-Sep 2020 to Jan-Sep 2021



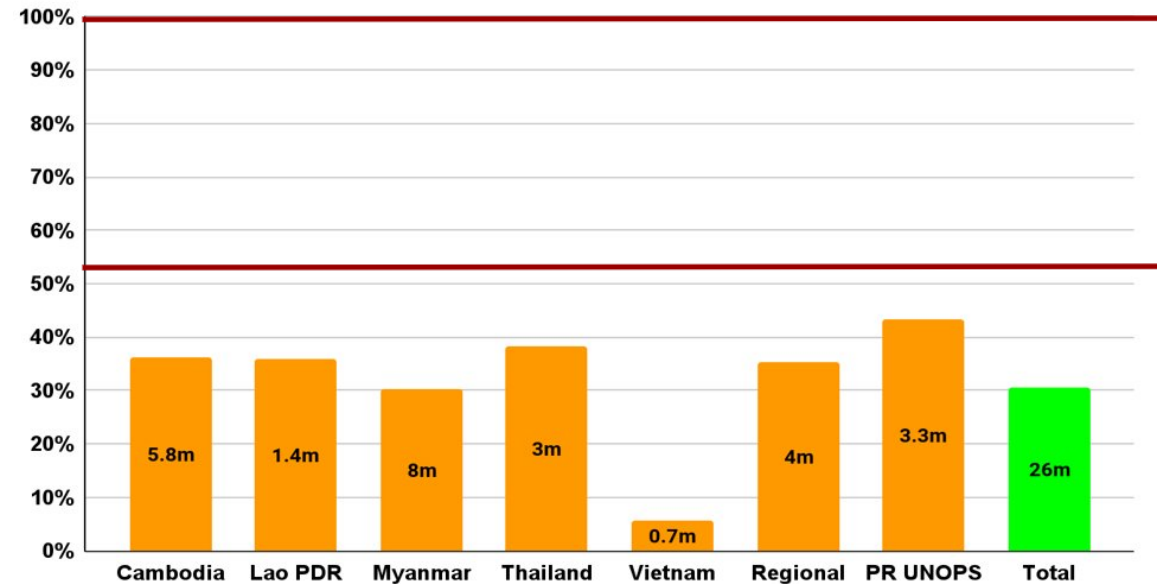
18th RAI Regional Steering Committee Meeting – RAI3E Grant Update



Key Achievements

-  0.34 million LLINs/LLIHNs distributed (mass distribution - 93,826; continuous distribution - 248,318)
-  35,000+ Volunteer Malaria Workers / Malaria Posts Workers supported to provide community case management services
-  2.47 million Suspected malaria cases received a parasitological test.
-  29,365 Confirmed malaria cases detected, of which 25,479 (87%) were treated as per national treatment guidelines.
-  62% Confirmed malaria cases in low endemic areas investigated.
-  83% Active foci received response within 7 days.

Key Challenge – Budget Absorption



18th RAI Regional Steering Committee Meeting – Operational Research Update

RAI2E Completed and Ongoing Operational Research Projects			
SR	Country	Project	Timeframe
IPC	Cambodia	Effectiveness of forest-based interventions in large forests of Cambodia	January 2018 – March 2021
MORU	Cambodia, Lao PDR, Thailand	Chemoprophylaxis in Cambodia, Lao PDR and Thailand	January 2018 – June 2021
SMRU	Myanmar	Assessment of environmental factors that influence malaria transmission	January 2018 – June 2021
AFRIMS	Cambodia	Chemoprophylaxis among border armed forces	January 2018 – March 2022
BI	Myanmar	Evaluation of community delivered models in Lao PDR and Myanmar	January 2018 – March 2022
HSD	Cambodia	Piloting radical cure of <i>P vivax</i> in Cambodia using G6PD RDT and primaquine	January 2018 - June 2022
UCSF	Lao, Thailand	Community-based ACD and treatment in high-risk groups in Lao PDR and Thailand	January 2018 – August 2022

RAI3E Ongoing Operational Research Projects		
SR	Country	Project
MORU	Cambodia, Thailand, Vietnam	Sustaining village health worker programmes with expanded roles in the GMS
IPC	Cambodia, Lao PDR	Plasmodium vivax elimination in the GMS: targeting the hypnozoite reservoir, expanding access to radical cure treatments and enhancing safe and effective case management
BI	Cambodia, Lao PDR, Myanmar, Vietnam	Personal protection packages for reducing residual malaria transmission in forest-going mobile and migrant populations in the Greater Mekong Subregion(GMS): Stepped-wedge trials with nested mixed methods study
BI	Cambodia, Lao PDR, Myanmar, Thailand, Vietnam, Yunnan (China)	Optimizing reactive surveillance and response strategies to achieve malaria elimination across the Greater Mekong Subregion



18th RAI Regional Steering Committee Meeting – Operational Research Update

Choosing interventions to eliminate forest malaria: preliminary results of two operational research studies inside Cambodian forests. Kunkel, A, Nguon, C, Iv, S, Chhim, S, Peov, D, Kong, P, Kim, S, Im, S, Debackere, M, Khim, N, Popovici, J, Srun, S, Vantaux, A, Guintran, JO, Witkowski, B, Piola, P. Malar J. 2021 <https://malariajournal.biomedcentral.com/articles/10.1186/s12936-020-03572-3>

The impact of community-delivered models of malaria control and elimination: a systematic review, Win Han Oo, Lisa Gold, Kerryn Moore, Paul A. Agius and Freya J. I. Fowkes, BMC Malaria Journal, 2019. <https://pubmed.ncbi.nlm.nih.gov/31387588/>

Community demand for comprehensive primary health care from malaria volunteers in South-East Myanmar: a qualitative study, Win Han Oo, Elizabeth Hoban, Lisa Gold, Kyu Kyu Than, Thazin La, Aung Thi, Freya J.I. Fowkes. BMC Malaria Journal, 2021. <https://pubmed.ncbi.nlm.nih.gov/33407489/>

Optimising Myanmar's community-delivered malaria volunteer model: a qualitative study of stakeholders' perspectives, Win Han Oo, Elizabeth Hoban, Lisa Gold, Kyu Kyu Than, Thazin La, Aung Thi, Freya J.I. Fowkes. BMC Malaria Journal, 2021. (<https://malariajournal.biomedcentral.com/articles/10.1186/s12936-021-03612-6>)



18th RAI Regional Steering Committee Meeting – Decisions

- ▶ The RSC endorsed a request from the Mekong Malaria Elimination programme for resources in 2022 to maintain the deployment of international and national epidemiologists at sub-national level.
- ▶ The RSC endorsed plans for media outreach and advocacy to enhance the visibility of the progress made under RAI.
- ▶ The RSC endorsed the appointment of the Executive Committee as the task force to support the RCM/CCM Evolution process.
- ▶ The RSC endorsed the wide sharing of the Independent Monitoring Panel's literature review of 8-aminoquinoline therapy for *P. vivax* malaria in the GMS.
- ▶ Given the non-functioning of the Myanmar CCM, the RSC is providing limited oversight support to enable activities funded by the Global Fund under RAI3E and C19RM.
- ▶ The 19th RSC Meeting is provisionally planned for 11-12 May.



RSC and CCM Collaboration



	Mandate/ Activity	Regional Steering Committee	National CCMs
1. Defining strategic funding priorities and resource allocation	1.1 Funding Request	<ul style="list-style-type: none"> Responsible for overall coordination & submission Provides high-level regional guidance, ensures regional coherence Develops regional component directly, in consultation with CCMs Ensures involvement/consultation with national/regional stakeholders 	<ul style="list-style-type: none"> Responsible for development of Country Components Ensures alignment with applicable national guidance / NSP Ensures involvement/consultation with national stakeholders
	1.2 PR/Co-PR selection	<ul style="list-style-type: none"> GF decision to appoint UNOPS as a single regional PR No role in endorsing national co-PRs 	<ul style="list-style-type: none"> CCMs can propose a national co-PR or Principal Sub-Recipient for country components (confirmed by GF)
	1.3 SR selection	<ul style="list-style-type: none"> Directly responsible for SR selection for the regional component (confirmed by GF) Consults with national CCMs on SR selection for the regional component (eg. CCMs involved as panel members and/or consulted prior to final RSC decision) No direct role in endorsing country component SRs (but RSC members may be invited to join CCM selection panels) 	<ul style="list-style-type: none"> Directly responsible for SR selection for country components (confirmed by GF) Provides inputs/feedback to SR selection for regional component
	1.4 Re-allocation of savings, reprogramming, extensions	<ul style="list-style-type: none"> Can directly approve re-allocation, reprogramming or extension of regional component funds/activities (national CCMs are notified of RSC decision) Can approve the re-allocation of funds between components/countries, after consultation with CCMs 	<ul style="list-style-type: none"> Can directly approve re-allocation, reprogramming or extension of country component funds (RSC is notified of CCM decision)
2. Grant oversight	2.1 Progress Update reports	<ul style="list-style-type: none"> Receives all Progress Update reports from regional PR (all countries/components) Receives PR quarterly update and circulates to CCMs 	<ul style="list-style-type: none"> Receives Progress Update reports from regional PR / co-PR / PSR (country component & regional component activities implemented at country-level)
	2.2 Oversight activities	<ul style="list-style-type: none"> Commissions independent assessment of progress through Independent Monitoring Panel (IMP) Consults closely with CCMs in planning/preparation of IMP activities (CCMs can be invited to participate in RSC/IMP activities) Shares relevant oversight information, including IMP reports, with CCMs Flags to CCMs any issues of concern or identified bottlenecks 	<ul style="list-style-type: none"> Holds national-level oversight activities (eg. field visits) on a regular basis (RSC can be invited in CCM oversight activities) Shares oversight plans, reports and recommendations with RSC Flags to RSC any issues of concern or identified bottlenecks



RAI Executive Document

RAI REGIONAL STEERING COMMITTEE (RSC)

RAI3E GRANT (2021-2023)
REGIONAL ARTEMISININ-RESISTANCE INITIATIVE

with the financial support of

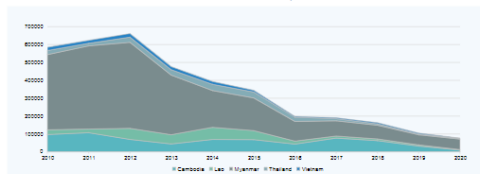


in partnership with:

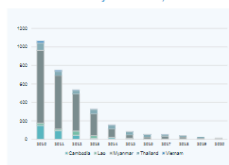


MALARIA EPIDEMIOLOGY IN THE GREATER MEKONG SUBREGION

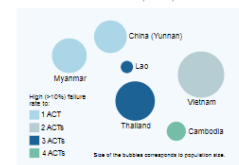
Malaria incidence in the GMS, 2010-2020



Malaria mortality in the GMS, 2010-2020



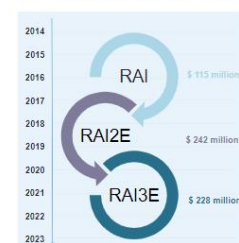
ACT failure rates, GMS, 2019



- Remarkable progress has been made towards malaria elimination in the GMS, with a 87% reduction in incidence and a 97% reduction in mortality from 2010 to the end of 2020.
- Plasmodium falciparum* cases have dropped particularly steeply, decreasing by 47% from 2010 to 2019. This achievement is especially important in the GMS, where *P. falciparum* resistance to artemisinin-based combination treatments is present across the region.
- ACT resistance in the GMS is a risk to global health security, as spread of drug resistance to higher burden countries would constitute a global public health emergency.
- Therefore, despite already decreasing numbers of cases and deaths in the GMS, accelerating progress towards elimination in the region is more important than ever before.
- With decreasing case counts, malaria is increasingly concentrated in hard-to-reach areas, including densely forested regions and border regions, and mobile and migrant populations are particularly affected.

APPROACHES TO MALARIA ELIMINATION IN THE GMS

HISTORY OF RAI GRANTS



- The Regional Artemisinin-Resistance Initiative (RAI) was launched in 2013 in response to the emergence of artemisinin-resistant malaria in the GMS.
- RAI is funded by The Global Fund to Fight AIDS, Tuberculosis and Malaria.
- RAI is the Global Fund's largest regional grant and the first with the defined goal of disease elimination.
- The first RAI grant (2014-2017) operationalized US\$ 115 million of malaria programming in five countries of the GMS: Cambodia, Lao, Myanmar, Thailand and Vietnam.
- The second RAI grant (RAI2E) covered the time period of 2018-2020 and disbursed US\$ 242 million to continue the successes achieved under the first RAI grant.
- The third RAI grant (RAI3E) covers the time period of 2021-2023 and disbursed US\$ 228 million.
- RAI grant funding has been used to purchase key malaria commodities, including vector control, diagnostics and quality-assured drugs, develop surveillance systems, support case management by community health workers, and build resilient and sustainable health and community systems.



OVERVIEW OF RAI3E

Target Population

- RAI3E employs several strategies to address the needs of remote, mobile and minority populations.
- Community members, and the local organisations that serve them, can raise issues to the RSC and ensure the unique needs of these populations are being met.
- Village and mobile malaria workers are members of the communities they serve, and are trained to deliver basic prevention, diagnosis and treatment services.
- RAI partners are recruiting and supporting approximately 39,000 malaria volunteers across the five GMS RAI3E countries.





Thank you

pscsecretariat@who.int

[Link to 18th RSC Meeting Documents and Presentations](#)

